

**REMARKS/ARGUMENTS**

Claims 1-3, 5-13, 15-17, 67 and 68 were examined and rejected. Claims 1, 11 and 12 have been amended. Claim 13 has been cancelled. Reexamination and reconsideration of the claims, as amended, are respectfully requested.

As an initial matter, Applicants note that claim 13 has been canceled. Claim 13 was objected to as lacking support in the drawings. To expedite prosecution, Applicants have chosen to cancel this claim without prejudice to filing an equivalent claim at a later time.

In an effort to expedite prosecution of the present application, claim 1 has been amended to recite the limitations previously set forth in claims 11 and 12. Prior to amendment, claims 11 and 12 set forth the combination of claim 1 with a stent delivery catheter (claim 11) or an angioplasty (claim 12). Claim 1 has now been amended to recite "*a treatment catheter introduced through the treatment port and outer shaft lumen*" as well as the further limitation that "*the treatment catheter is disposed in parallel to the inner elongated hollow shaft when both are in the outer shaft lumen.*" Claims 11 and 12 have been amended to clarify that the treatment catheter is either stent delivery catheter or an angioplasty catheter, respectively.

As the claims now recite to the limitations previously set forth in claims 11 and 12, Applicants will focus on the rejection stated at the bottom of page 4 where claims 11 and 12 were rejected over Dubrul or Constantz further in view of Kokish et al. The Examiner argues that Kokish discloses a stent delivery/angioplasty catheter introduced through a treatment port and that it would have been obvious to combine this teaching with that of either Dubrul or Constantz. Applicants respectfully disagree.

In Figs. 5-10 of Kokish, an angioplasty balloon 86 is shown disposed between a distal balloon 80 and a proximal blocking catheter 82 having perforations 92 to permit drug delivery. The system is co-axial and the angioplasty balloon is necessarily maintained between the distal and proximal balloons, as shown in all the figures.

In contrast, the claimed catheter of the present invention is now directed at the embodiments of Figs. 3C and 3D where the inner elongated hollow shaft and treatment catheter are introduced through the treatment port and the outer shaft lumen and **may be advanced in parallel** so that the inner elongated hollow shaft having the rinse head may be disposed either proximally or distally to the treatment catheter. Moreover, the inner elongated hollow shaft is free of an expandable occluder, which is directly contrary to the purpose of Kokish where the formation of an isolated region between the distal and proximal balloons is necessary.

Applicants realize that the present rejection is based on the asserted obviousness of the combination of Kokish with either Constantz or Dubrul. Such a combination, however, is contraindicated. Moreover, if the combination were made, it would not result in the claimed combination. Constantz '979 shows a dual balloon structure very similar to Kokish having a rinse head on an inner catheter. The combination with Kokish would provide a balloon angioplasty catheter riding over the inner shaft which would again be entrapped with then the distal and proximal balloons, contrary to the claim requirements of the present application. Moreover, if the combination were made, Kokish specifically teaches that the treatment catheter is coaxial with the infusion catheter, not in parallel as now required in claim 1, as amended.

Dubrul, in contrast, is a dissolution catheter intended for direct advancement through an occlusion. At best, a combination with Kokish would suggest that the dissolution catheter be substituted for the distal balloon/infusion catheter, again resulting in a co-axial structure, in contrast to the presently claimed parallel structure of the present application.

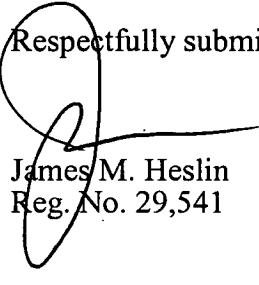
In view of the above amendments and remarks, Applicants believe that all claims, as presently amended, are in condition for allowance and request that the application be passed to issue at an early date.

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PATENT

If for any reason the Examiner believes that a telephone conference would in any way expedite prosecution of the subject application, the Examiner is invited to telephone the undersigned at (650) 326-2400.

Respectfully submitted,

  
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